

State of Utah
Administrative Rule Analysis
Revised December 2019

NOTICE OF PROPOSED RULE

TYPE OF RULE: Amendment

	Title No. - Rule No. - Section No.	
Utah Admin. Code Ref (R no.):	R414-311	Filing No. (Office Use Only)
Changed to Admin. Code Ref. (R no.):		

Agency Information

1. Department:	Department of Health	
Agency:	Division of Medicaid and Health Financing	
Room no.:		
Building:	Cannon Health Building	
Street address:	288 North 1460 West	
City, state:		
Mailing address:	PO Box 143102	
City, state, zip:	Salt Lake City, UT, 84114-3102	
Contact person(s):		
Name:	Phone:	Email:
Craig Devashrayee	(801) 538-6641	cdevashrayee@utah.gov

Please address questions regarding information on this notice to the agency.

General Information

2. Rule or section catchline:
Targeted Adult Medicaid
3. Purpose of the new rule or reason for the change (If this is a new rule, what is the purpose of the rule? If this is an amendment, repeal, or repeal and reenact, what is the reason for the filing?):
The purpose of this change is to implement new subgroups and restrictions for the Targeted Adult Medicaid (TAM) program, in accordance with Utah's 1115 Demonstration Waiver.
4. Summary of the new rule or change:
This amendment implements four new subgroups for the TAM program, clarifies provisions within the program, clarifies program eligibility in terms of Medicare, and makes other technical changes.

Fiscal Information

5. Aggregate anticipated cost or savings to:
A) State budget:
There is an anticipated cost of about \$28,000,000 to the state budget.
B) Local governments:
There is no impact on local governments because they neither fund nor provide services under the Targeted Adult Medicaid program.
C) Small businesses ("small business" means a business employing 1-49 persons):
Small businesses in the fields of social services, mental health, and addiction recovery may see a portion of annual revenue based on the total amount of \$28,000,000, with the expansion TAM eligibility.
D) Non-small businesses ("non-small business" means a business employing 50 or more persons):
Non-small businesses in the fields of social services, mental health, and addiction recovery may see a share of revenue based on the total amount of \$28,000,000, with the expansion of TAM eligibility.

E) Persons other than small businesses, non-small businesses, state, or local government entities

("person" means any individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an **agency**):

Medicaid providers may see a share of revenue based on the total amount of \$28,000,000, with the expansion of TAM eligibility. Individuals who become eligible for the TAM program may also see out-of-pocket savings based on that amount.

F) Compliance costs for affected persons:

There are no compliance costs because this change can only result in business revenue and out-of-pocket savings.

G) Regulatory Impact Summary Table (This table only includes fiscal impacts that could be measured. If there are inestimable fiscal impacts, they will not be included in this table. Inestimable impacts will be included in narratives above.)

Regulatory Impact Table			
Fiscal Cost	FY2020	FY2021	FY2022
State Government	\$0	\$28,000,000	\$0
Local Governments	\$0	\$0	\$0
Small Businesses	\$0	\$0	\$0
Non-Small Businesses	\$0	\$0	\$0
Other Persons	\$0	\$0	\$0
Total Fiscal Cost	\$0	\$28,000,000	\$0
Fiscal Benefits			
State Government	\$0	\$0	\$0
Local Governments	\$0	\$0	\$0
Small Businesses	\$0	\$8,400,000	\$0
Non-Small Businesses	\$0	\$9,800,000	\$0
Other Persons	\$0	\$9,800,000	\$0
Total Fiscal Benefits	\$0	\$28,000,000	\$0
Net Fiscal Benefits	\$0	\$0	\$0

H) Department head approval of regulatory impact analysis:

The Executive Director of the Department of Health, Joseph K. Miner, M.D., has reviewed and approved this fiscal analysis.

6. A) Comments by the department head on the fiscal impact this rule may have on businesses:

Businesses will see a share of revenue with the expansion of eligibility for the Targeted Adult Medicaid program.

B) Name and title of department head commenting on the fiscal impacts:

Joseph K. Miner, M.D., Executive Director

Citation Information**7. This rule change is authorized or mandated by state law, and implements or interprets the following state and federal laws. State code or constitution citations (required):**

Section 26-1-5	Section 26-18-3	Pub L. No. 111-148
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Incorporations by Reference Information

(If this rule incorporates more than two items by reference, please include additional tables.)

8. A) This rule adds, updates, or removes the following title of materials incorporated by references (a copy of materials incorporated by reference must be submitted to the Office of Administrative Rules; *if none, leave blank*):

	First Incorporation
Official Title of Materials Incorporated (from title page)	
Publisher	

Date Issued	
Issue, or version	

B) This rule adds, updates, or removes the following title of materials incorporated by references (a copy of materials incorporated by reference must be submitted to the Office of Administrative Rules; *if none, leave blank*):

	Second Incorporation
Official Title of Materials Incorporated (from title page)	
Publisher	
Date Issued	
Issue, or version	

Public Notice Information

9. The public may submit written or oral comments to the agency identified in box 1. (The public may also request a hearing by submitting a written request to the agency. The agency is required to hold a hearing if it receives requests from ten interested persons or from an association having not fewer than ten members. Additionally, the request must be received by the agency not more than 15 days after the publication of this rule in the Utah State Bulletin. See Section 63G-3-302 and Rule R15-1 for more information.)

A) Comments will be accepted until (mm/dd/yyyy):		03/02/2020
B) A public hearing (optional) will be held:		
On (mm/dd/yyyy):	At (hh:mm AM/PM):	At (place):

10. This rule change MAY become effective on (mm/dd/yyyy):	03/09/2020
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NOTE: The date above is the date on which this rule MAY become effective. It is NOT the effective date. After the date designated in Box 10, the agency must submit a Notice of Effective Date to the Office of Administrative Rules to make this rule effective. Failure to submit a Notice of Effective Date will result in this rule lapsing and will require the agency to start the rulemaking process over.

Agency Authorization Information

To the agency: Information requested on this form is required by Sections 63G-3-301, 302, 303, and 402. Incomplete forms will be returned to the agency for completion, possibly delaying publication in the *Utah State Bulletin*, and delaying the first possible effective date.

Agency head or designee, and title:	Joseph K. Miner, M.D., Executive Director	Date (mm/dd/yyyy):	01/08/2020
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R414. Health, Health Care Financing, Coverage and Reimbursement Policy.

R414-311. Targeted Adult Medicaid.

R414-311-2. Definitions.

The definitions in Rules R414-1 and R414-301 apply to this rule. In addition, the following definitions apply throughout this rule:

(1) "Chronically ~~[H]~~homeless ~~[F]~~individual" means an individual who:

(a) has a substance use disorder, serious mental illness, developmental disability, post-traumatic stress disorder, cognitive impairments resulting from a brain injury, or chronic illness or disability; and

(~~[a]~~i) ~~[is living]~~lives or residinges for at least 12 months, or on at least four separate occasions that amount to at least 12 months in the last three years, in a place not meant for human habitation, in a safe haven, or in an emergency shelter; or

(~~[b]~~ii) ~~[is living]~~lives in supportive housing and has previously met the criteria established in Subsection R414-311-2(~~[2]~~1)(a)(i).

(b) lives or resides for at least six months within a 12-month period in a place not meant for human habitation, in a safe haven, or an emergency shelter, and has a substance use or serious mental health disorder; or

(c) is a victim of domestic violence who resides in a place not meant for human habitation, a safe haven, or in an emergency shelter.

(2) "Dependent ~~[C]~~child" means a child who is under 19 years of age, and required to be included in the ~~[Targeted Adult Medicaid]~~household size for the Targeted Adult Medicaid program.

(3) "Individual ~~[N]~~needing ~~[F]~~treatment" means an individual who:

(a) ~~[is receiving]~~receives General Assistance from the Department of Workforce Services and has been diagnosed with a substance use or mental health disorder; or

(b) was discharged from the Utah State Hospital and was admitted due to a civil commitment~~[-]~~;

~~[-] (c) is living or residing for at least 6 months within a 12-month period in a place not meant for human habitation, in a safe haven, or an emergency shelter, and has a substance use or serious mental health disorder.]~~

(4) "Justice ~~[F]~~involved ~~[F]~~individual[s]" means an individual who needs substance use or mental health treatment and:

(a) has complied with and substantially completed a substance use disorder treatment program while incarcerated in jail or prison; or

(b) was discharged from the Utah State Hospital and was admitted to the civil unit in connection with a criminal charge, or to the forensic unit due to a criminal offense, ~~[with]~~in which the individual was charged or convicted; ~~[or]~~

(c) is involved with a drug or mental health court~~[-]~~;

(d) is court-ordered to receive substance abuse or mental health treatment through a district or tribal court;
or

(e) is on probation or parole with a serious mental illness, serious substance use disorder, or both.

R414-311-4. General Eligibility Requirements.

Unless otherwise stated, the provisions in Rule R414-302 and Section R414-306-4 apply to applicants and enrollees.

(1) The following individuals are not eligible for Targeted Adult Medicaid:

(a) Individuals who do not meet the coverage group criteria of being chronically homeless, justice-involved, or needing treatment as defined in Section R414-311-2;

(b) Individuals who have a dependent child under 19 years old; ~~[or]~~

(c) Individuals who are eligible for a Medicaid program without a spenddown~~[-]~~; or

(d) Individuals who are eligible for or receive Medicare.

(2) An individual must be at least 19 years old and not yet 65 years old to enroll in Targeted Adult Medicaid.

(a) The month in which an individual turns 19 years old is the first month in which the individual may enroll in Targeted Adult Medicaid.

(b) An individual may only enroll in Targeted Adult Medicaid through the month in which the individual turns 65 years old.

(3) The eligibility agency only enrolls applicants during an open enrollment period. The eligibility agency may limit the number it enrolls and may stop enrollment at any time. The open enrollment period may be limited to a coverage group or a subgroup within the coverage group.

(4) The eligibility agency shall waive the open enrollment requirement for the following ~~[situations]~~
individuals:

(a) ~~[The]~~An individual who was previously on Targeted Adult Medicaid, and ~~[is moving]~~moves from another Medicaid program back to Targeted Adult Medicaid, is otherwise eligible, and there is no break in coverage between the medical programs;

~~[(b) The individual is no longer eligible for PCN, is otherwise eligible, and there is no break in coverage between the two medical programs; or]~~

~~[(e)b]~~ [The]An enrollee who completes a review within three months of case closure as outlined in Section R414-308-6~~[-]; or~~

(c) A member of a federally recognized tribe.

~~(5) [A resource test is not required]~~The eligibility agency does not require a resource test.

R414-311-5. Application, Eligibility Reviews and Improper Medical Assistance.

(1) Unless otherwise stated, the provisions of Rule R414-308 apply to all applicants and enrollees.

(2) Subject to the provisions of Subsection R414-311-5(3), an individual who is determined eligible shall receive 12 months of coverage that begins with the first month of enrollment.

(3) ~~[Coverage]~~Before the end of the 12-month certification period, the eligibility agency may terminate eligibility ~~[for Targeted Adult Medicaid may end before the end of the 12-month certification period]~~if the individual:

(a) turns 65 years old;

(b) moves out of state;

(c) becomes eligible for another Medicaid program;

(d) enters ~~[a public institution or]~~ an institution for mental disease, except as described in Section R414-302-6;

(e) is convicted of fraud; ~~[or]~~

(f) leaves the household~~[-]; or~~

(g) is eligible for or receives Medicare.

(4) An individual who leaves prison, jail, or the Utah State Hospital must submit an application within 60 days of release or discharge.

(5) An enrollee must verify at each review, that ~~[he]~~the enrollee meets the criteria of a coverage group, as defined in Section R414-311-2. An enrollee who no longer meets criteria of a coverage group is no longer eligible for Targeted Adult Medicaid.

KEY: Medicaid, Targeted Adult Medicaid, eligibility

Date of Enactment or Last Substantive Amendment: August 29, 2019

Authorizing, and Implemented or Interpreted Law: 26-18